B1 (Official Form 1)(04/13)										
] .	United S Mi			ruptcy f Florid					Voluntary	Petition
Name of Debtor (if individual, ente Reece, Martyn C.	r Last, First,	Middle):			Name	of Joint De	ebtor (Spouse) (Last, First	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						used by the J maiden, and		in the last 8 years):		
Last four digits of Soc. Sec. or Indiv (if more than one, state all)	vidual-Taxpa	yer I.D. (l	ITIN)/Com	plete EIN	Last for	our digits o	f Soc. Sec. or	· Individual-	Taxpayer I.D. (ITIN) N	o./Complete EIN
Street Address of Debtor (No. and S 6503 Virginia Crossing University Park, FL	Street, City, a	nd State):	:	ZIP Code		Address of	Joint Debtor	(No. and St	reet, City, and State):	ZIP Code
County of Residence or of the Princ	ipal Place of	Business		34201		y of Reside	ence or of the	Principal Pl	ace of Business:	
Manatee		. 11			74.71	A 11	CL: (D.)	/'C 1'CC		
Mailing Address of Debtor (if differ	ent from stre	et addres	s):		Mailin	ig Address	of Joint Debt	or (if differe	nt from street address):	
			_	ZIP Code						ZIP Code
Location of Principal Assets of Busi (if different from street address above										1
Type of Debtor				of Business					otcy Code Under Whi	c h
(Form of Organization) (Check o Individual (includes Joint Debto: See Exhibit D on page 2 of this form. □ Corporation (includes LLC and I □ Partnership □ Other (If debtor is not one of the abcheck this box and state type of entity)	rs) LLP) ove entities,	Sing in 11 Rails Stock	th Care Bu le Asset Re I U.S.C. § road kbroker amodity Bro ring Bank	eal Estate as 101 (51B)	defined	☐ Chapt☐	er 7 er 9 er 11 er 12	☐ Ci of ☐ Ci of	hapter 15 Petition for R a Foreign Main Procee hapter 15 Petition for R a Foreign Nonmain Pr	eding ecognition
Chapter 15 Debtors Country of debtor's center of main interes	ete.	Othe		mpt Entity		_			e of Debts k one box)	
Each country in which a foreign proceed by, regarding, or against debtor is pending	ling	under	(Check box or is a tax-ex r Title 26 of	e, if applicable tempt organize the United St I Revenue Co	e) zation tates	defined "incurr	are primarily condition of the second of the	§ 101(8) as idual primarily	busin	are primarily ess debts.
Filing Fee (Ch Full Filing Fee attached Filing Fee to be paid in installments attach signed application for the coundebtor is unable to pay fee except in Form 3A. Filing Fee waiver requested (application attach signed application for the coundebter)	(applicable to int's consideration installments. R	individuals on certifyir Rule 1006(l 7 individua	ng that the b). See Office als only). Mu	ial	Debtor is not if: Debtor's aggrage less than the land applicable A plan is bein	a small busi regate nonco \$2,490,925 (e boxes: ng filed with	debtor as definess debtor as contingent liquidamount subject this petition.	defined in 11 to ated debts (exc to adjustment		ee years thereafter).
Statistical/Administrative Informa	ation			i	n accordance	with 11 U.S	S.C. § 1126(b).	THIS	SPACE IS FOR COURT	USE ONLY
■ Debtor estimates that funds will □ Debtor estimates that, after any each there will be no funds available.	exempt prope	erty is exc	cluded and	administrati		es paid,				
Estimated Number of Creditors	D D] 1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets	\$500,001 \$ to \$1	5,000 61,000,001 o \$10 nillion	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million		\$500,000,001 to \$1 billion	More than			
Estimated Liabilities	\$500,001 \$	31,000,001 o \$10	\$10,000,001 to \$50	\$50,000,001 to \$100	\$100,000,001 to \$500	\$500,000,001 to \$1 billion				

Case 8:14-bk-08027-KRM Doc 1 Filed 07/11/14 Page 2 of 47

B1 (Omciai For	m 1)(04/13)		Page 2		
Voluntar	y Petition	Name of Debtor(s): Reece, Martyn C.			
(This page mu	st be completed and filed in every case)				
	All Prior Bankruptcy Cases Filed Within Last	t 8 Years (If more than two, attach	additional sheet)		
Location Where Filed:	Middle District of FL	Case Number: 10-19538	Date Filed: 8/13/10		
Location Where Filed:		Case Number:	Date Filed:		
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more t	han one, attach additional sheet)		
Name of Debt - None -	or:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A		Exhibit B		
forms 10K a pursuant to S	oleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)	I, the attorney for the petitioner nat have informed the petitioner that [I 12, or 13 of title 11, United States	dual whose debts are primarily consumer debts.) med in the foregoing petition, declare that I ne or she] may proceed under chapter 7, 11, Code, and have explained the relief available certify that I delivered to the debtor the notice		
☐ Exhibit	A is attached and made a part of this petition.	X /s/ Christopher D. Smit	h July 11, 2014		
		Signature of Attorney for Debto Christopher D. Smith 6	or(s) (Date)		
	Exh	aibit C			
_	or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifia	able harm to public health or safety?		
	Exh	nibit D			
Exhibit If this is a join	-	a part of this petition.	ch a separate Exhibit D.)		
L Exhibit	D also completed and signed by the joint debtor is attached a				
	Information Regardin (Check any ap	_			
■	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	al place of business, or principal as			
-	There is a bankruptcy case concerning debtor's affiliate, go	eneral partner, or partnership pendi	ing in this District.		
	Debtor is a debtor in a foreign proceeding and has its print this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	s in the United States but is a defen ne interests of the parties will be se	dant in an action or rved in regard to the relief		
	Certification by a Debtor Who Reside (Check all app		perty		
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box check	ed, complete the following.)		
	(Name of landlord that obtained judgment)				
	(Address of landlord)				
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment				
	Debtor has included with this petition the deposit with the after the filing of the petition.		-		

B1 (Official Form 1)(04/13) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Martyn C. Reece

Signature of Debtor Martyn C. Reece

 \mathbf{X}

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 11, 2014

Date

Signature of Attorney*

X /s/ Christopher D. Smith

Signature of Attorney for Debtor(s)

Christopher D. Smith 605433

Printed Name of Attorney for Debtor(s)

Christopher D. Smith P.A.

Firm Name

5391 Lakewood Ranch Blvd N STE 203 Sarasota, FL 34240

Address

Email: smith@ChrisSmith.com

941-907-4774 Fax: 941-907-3040

Telephone Number

July 11, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

$Signature\ of\ Debtor\ (Corporation/Partnership)$

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Reece, Martyn C.

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

T 7
Λ

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

_		
	7	

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Middle District of Florida

In re	Martyn C. Reece		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

1D (Official Form 1, Exhibit D) (12/09) - Cont.	ge 2
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);	
□ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or	or
through the Internet.); Active military duty in a military combat zone.	
Active minitary duty in a minitary comoat zone.	
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling equirement of 11 U.S.C. § 109(h) does not apply in this district.	
I certify under penalty of perjury that the information provided above is true and correct.	
Signature of Debtor: /s/ Martyn C. Reece Martyn C. Reece	
Date: July 11, 2014	

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Middle District of Florida

In re	Martyn C. Reece		Case No.		
-		Debtor	,		
			Chapter	13	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	1,172,960.04		
B - Personal Property	Yes	3	1,675.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	3		812,213.27	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	1		39,636.50	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			5,395.01
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,357.73
Total Number of Sheets of ALL Schedu	ıles	16			
	T	otal Assets	1,174,635.04		
			Total Liabilities	851,849.77	

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Middle District of Florida

In re	Martyn C. Reece		Case No.		
		Debtor			
			Chapter	13	
			•		

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	5,395.01
Average Expenses (from Schedule J, Line 22)	5,357.73
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	3,388.71

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		39,636.50
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		39,636.50

B6A (Official Form 6A) (12/07)

In re	Martyn C. Reece	Case No

Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
237 Beachwood Rd Unit 223 Amelia Island, FL 32034 (property deeded back to Condo Assoc - not recorded)	Fee simple	н	381,305.73	381,305.73
3211 Sea Marsh Rd. Amelia Island, FL 34234	Fee simple	н	452,152.60	108,414.06
3021 Sea Marsh Rd. Amelia Island, FL 34234	Fee simple	Н	339,501.71	Unknown

Sub-Total > **1,172,960.04** (Total of this page)

Total > 1,172,960.04

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Martyn C. Reece		Case No.	
_		Debtor		

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	ВМО І	3ank ***2087	н	575.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	dishes	s, sofa, loveseat, kitchen table and chairs, s, pots and pans, misc wall prints, TV, uter, coffee table, leather chair, 2 end tables.	н	1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
5.	Wearing apparel.	Clothe	es and shoes	-	100.00
	Furs and jewelry.	X			
3.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	USAA	Insurance	-	0.00
10.	Annuities. Itemize and name each issuer.	X			
			(Tota)	Sub-Total of this page)	al > 1,675.00

2 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Martyn C. Reece	Case No
	•	

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(Continuation Sheet)		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	x			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			T)	Sub-Tota otal of this page)	al > 0.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re	Martyn C. Reece	Case No.
	•	

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 1,675.00 |

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re	Martyn C. Reece	Case No.
_		Debtor

SCHEDULE C - 1	PROPERTY CLAIMED AS	ЕХЕМРТ		
Debtor claims the exemptions to which debtor is entitled und (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)	\$155,675. (Amount s		mption that exceeds /16, and every three years thereafto or after the date of adjustment.)	
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption	
Checking, Savings, or Other Financial Accounts, Cer BMO Bank ***2087	tificates of Deposit Fla. Stat. Ann. § 222.25(4)	575.00	575.00	
Household Goods and Furnishings 2 beds, sofa, loveseat, kitchen table and chairs, dishes, pots and pans, misc wall prints, TV, computer, coffee table, leather chair, 2 end tables.	Fla. Const. art. X, § 4(a)(2)	1,000.00	1,000.00	
Wearing Apparel Clothes and shoes	Fla. Stat. Ann. § 222.25(4)	100.00	100.00	

Total: 1,675.00 1,675.00

B6D (Official Form 6D) (12/07)

In re	Martyn C. Reece	Case No.
		

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H W	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	LIQUI	S	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Unit ID 302107			2010-2014	٦т	D A T E D			
AIPCA PO Box 15729 Fernandina Beach, FL 32035		-	Condo Association Lien 3021 Sea Marsh Rd. Amelia Island, FL 34234					
	_	_	Value \$ 339,501.71	┸		Ш	5,493.48	0.00
Account No. Unit ID 321106 AIPCA PO Box 15729 Fernandina Beach, FL 32035		-	2010-2014 Condo Association Lien 3211 Sea Marsh Rd. Amelia Island, FL 34234					
Account No. Unit ID: 22305	+	╁	Value \$ 452,152.60 2010 - 2014	+	├	Н	5,508.60	0.00
AIPCA PO Box 15729 Fernandina Beach, FL 32035		-	Condo Association Lien 237 Beachwood Rd Unit 223 Amelia Island, FL 32034 (property deeded back to Condo Assoc not recorded)	-				
			Value \$ 381,305.73				5,613.48	0.00
Account No. Ben-Ezra & Katz PA Michelle Shupe- Abbas 2901 Stirling Rd. STE 900 Fort Lauderdale, FL 33312			additonal notice AIPCA Value \$				Notice Only	
2 continuation sheets attached			(Total of	Sub this			16,615.56	0.00

 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

In re	Martyn C. Reece	Case No
-		Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Hu H V J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLIQUIDATE	I SPUTE	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xx-xA-683 Christina Trust / Wilmington Trustee Stanwich Mort Loan c/o Ashley L Simon, Esq PO Box 800 Tampa, FL 33602		-	mortgage 3021 Sea Marsh Rd. Amelia Island, FL 34234 Value \$ 339,501.71		ED		Unknown	Unknown
Account No. 10-000054 CC XYX	1		8/2/10	T		T		
Fairway Oaks Condo Assoc c/o Betty Bremson, Pres 3305 Sea Marsh Rd. Fernandina Beach, FL 32034		-	Condo Association Lien 3211 Sea Marsh Rd. Amelia Island, FL 34234					
	┖		Value \$ 452,152.60				61,905.46	0.00
Account No. Teresa L Prince, Esq. 406 Ash St. Fernandina Beach, FL 32034			additonal notice Fairway Oaks Condo Assoc				Notice Only	
Account No. 13 CA 000387 AX	╁		6/01/07	╁		H		
Pennymac Loan Services 6101 Condor Drive, Suite 200 Moorpark, CA 93021		-	First Mortgage 3211 Sea Marsh Rd. Amelia Island, FL 34234 Value \$ 452,152.60				41,000.00	0.00
Account No. 13CA000387AXYX Gweneth M Brimm Esq. 1587 Northeast Exp Atlanta, GA 30329			additonal notice Pennymac Loan Services				Notice Only	
			Value \$	1	<u>_</u>			
Sheet 1 of 2 continuation sheets atta Schedule of Creditors Holding Secured Claim		d to	(Total of t	Subt his			102,905.46	0.00

 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

In re	Martyn C. Reece	Case No
-		Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Hu H W J C	band, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLIQUIDA	ISPUTE	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 9420039078605 Suntrust Mortgage Attention: Bankruptcy PO box 85092 Richmond, VA 23286			additonal notice Pennymac Loan Services Value \$	Τ̈́	T E D		Notice Only	
Account No. Sandcastles Condo Assoc. c/o Kenneth Hewitt, Pres. 9470 Riverclub Pkwy Duluth, GA 30097		-	2010-2014 Condo Association Lien 237 Beachwood Rd Unit 223 Amelia Island, FL 32034 (property deeded back to Condo Assoc - not recorded)					
Account No. Joshua Martin, Esq. 960185 Gateway Blvd STE 104 Fernandina Beach, FL 32034	_		Value \$ 381,305.73 additional notice Sandcastles Condo Assoc.				25,692.25 Notice Only	0.00
Account No. 9420031457849 Suntrust Mortgage Attention: Bankruptcy PO box 85092 Richmond, VA 23286		-	Value \$ 1/01/05 First Mortgage 237 Beachwood Rd Unit 223 Amelia Island, FL 32034 (property deeded back to Condo Assoc - not recorded) Value \$ 381,305.73				350,000.00	0.00
Account No. 9420034635839 Suntrust Mortgage Attention: Bankruptcy PO box 85092 Richmond, VA 23286		-	12/01/05 First Mortgage 3021 Sea Marsh Rd. Amelia Island, FL 34234 Value \$ 339,501.71				317,000.00	0.00
Sheet 2 of 2 continuation sheets atta Schedule of Creditors Holding Secured Claim		d to	,	Subt his			692,692.25	0.00
22Cano of Cicatons Holding Societa Claim			(Report on Summary of Sc	T	ota	ıl	812,213.27	0.00

B6E (Official Form 6E) (4/13)

•		
In re	Martyn C. Reece	Case No.
-	-	, Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re	Martyn C. Reece	Case No
_		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Check this box it debtor has no creditors holding unsecur-							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)		C H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. Unit #3046 Club Villas			2010-2014	Τ̈́	Ť		
Club Villas Association c/o Tom Hollinsworth, Pres. 280 Skyline Parkway Athens, GA 30606		-	3021 Sea Marsh Rd. Amelia Island, FL 34234		D		39,636.50
Account No.	┢			-		H	
Edward Volger, Esq. 2411 Manatee Ave West Bradenton, FL 34205	-		additonal notice Club Villas Association				Notice Only
Account No.							
Joshua Martin, Esq. 960185 Gateway Blvd. STE 104 Amelia Island, FL 32034			additonal notice Club Villas Association				Notice Only
Account No.							
continuation sheets attached			(Total of t	Subt			39,636.50
			(Report on Summary of So		ota lule		39,636.50

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B6G (Official Form 6G) (12/07)

In re	Martyn C. Reece		Case No.	
-		Debtor		

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Hyundai Motor Finance Attention: Bankruptcy Po Box 20809 Fountain Valley, CA 92728 Acct# 1402768980 Opened 2/01/14 Lease on 2014 Hyundai

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Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

Martyn C. Reece

B6H (Official Form 6H) (12/07)

In re

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Case No.

Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question attach a separate sheet to this form. If you have mothing to get pages in living with you, do not include information about your spouse in leading with you, do not include information about your spouse in leading with you, do not include information about your non-filling spouse in leading with you, do not include information about your spouse in leading with you, do not include information about your spouse in leading with you, do not include information about your spouse in leading with you, do not include information about your non-filling spouse in leading with you, do not include information about your spouse is needed, attach a separate your rame and case number (if known). Answer every question in leading with you, do not include info											
Debtor 2 (Spouse, if living) United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA Case number (If known) Official Form B 6! Schedule I: Your Income 12/1: Be as complete and accurate as possible. If two married people are filling logether (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question to the property of the	Fill	in this information to identify your o	ase:								
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA Case number (If known) Check if this is: An amended filing A supplement showing post-petition chapter 13 income as of the following date: MM7/DD/YYYY Schedule I: Your income Schedule I: Your income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse is not filing with you, do not include information are speared and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information and your spouse is not filing with you, do not include information and the spouse is present the spouse in your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question response than one job, attach a separate page with information. If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Employed Payne Law Group Employer's address 240 S Pineapple Ave STE 401 Sarasota, FL 34236 How long employed there? Since 2004 15 years Fart 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse	Deb	otor 1 Martyn C. R	eece								
Case number (If known) Check if this is:						_					
Official Form B 6I Schedule I: Your Income 1/21/3 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for purplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Cocupation may include student or homemaker, if it applies. Employer's address 240 S Pineapple Ave STE 401 Sarasota, FL 34236 How long employed there? Since 2004 Since 2004 Since 2004 Is years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. For Debtor 1 For Debtor 2 or non-filing spouse.	Unit	ted States Bankruptcy Court for the	e: MIDDLE DISTRICT O	F FLORIDA							
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:							☐ An amende☐ A supplem	ed filing ent showi	0		
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question pages, write your name and case number (if known). Answer every question attach a separate page with information. If you have more than one job, attach a separate page with information about additional employers. Debtor 1 Debtor 2 or non-filing spouse Employed Employed Not employed Not employed Not employed Not employed Paralegal Employer's name Self Employed Payne Law Group Employer's address 240 S Pineapple Ave STE 401 sarasota, FL 34236 How long employed there? Since 2004 15 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. List monthly gross wages, salary, and commissions (before all payroll	Of	fficial Form B 6I							Tollowing date.		
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:			ome				IVIIVI / DD/ \	7 7 7 7		12/13	
If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Comparison to the work of the wore of the work of	supį spoi attad	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not fili ar spouse is not filing w	ng jointly, and y ith you, do not i	our spouse nclude info	is livi rmatio	ng with you, inc n about your sp	lude info ouse. If r	rmation abou nore space is	t your needed,	
attach a separate page with information about additional employers. Occupation Realtor Paralegal Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Self Employed Payne Law Group Employer's address 240 S Pineapple Ave STE 401 Sarasota, FL 34236 How long employed there? Since 2004 15 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse List monthly gross wages, salary, and commissions (before all payroll	1.			Debtor 1			Debtor 2	2 or non-	filing spouse		
attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address Cocupation may include student or homemaker, if it applies. Employer's address How long employed there? Since 2004 15 years Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll			Employment status	■ Employed			■ Empl	■ Employed			
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Self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Since 2004 Employer's address How long employed there? Since 2004 If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll			Occupation	Occupation Realtor							
How long employed there? Since 2004 Sarasota, FL 34236			Employer's name	Self Employ	ed		Payne	Law Gro	oup		
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll			Employer's address								
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll			How long employed to	here? Sin	ce 2004			15 years			
	Estii spou If you more	mate monthly income as of the case unless you are separated. u or your non-filing spouse have me space, attach a separate sheet to	ore than one employer, control this form.	ombine the inforr	nation for all	emplo	yers for that pers	For Do	e lines below. If ebtor 2 or ling spouse	-	
3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$	3.	, , ,		.,		+\$	0.00	+\$	0.00		
4. Calculate gross Income. Add line 2 + line 3. 4. \$ 0.00 \$ 3,761.90						_		_			

Debt	or 1	Martyn C. Reece		Case number (if known)	
	Сор	y line 4 here	4.	For Debtor 1	For Debtor 2 or non-filing spouse \$ 3,761.90
5.	l ist	all payroll deductions:			
3.	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Health Savings	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ 658.86 \$ 0.00 \$ 433.33 \$ 0.00 \$ 0.00 \$ 0.00 \$ 274.99
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$0.00	\$1,367.18_
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$2,394.72_
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e.	\$ 755.29 \$ 0.00 \$ 0.00 \$ 2,245.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 + \$ 0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$ 3,000.29	\$
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3,000.29 + \$_	2,394.72 = \$ 5,395.01
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depen	•	
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaies			
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?		monthly income
		Yes. Explain:			

Eill	in this informat	tion to identify	Our case.				
	in uns informa	non to identify	our case.				
Deb	tor 1	Martyn C.	Reece		Chec	ck if this is:	
						an amended filing	
	tor 2 ouse, if filing)						g post-petition chapter 13
(Spc	ouse, ii iiiiig)				(expenses as of the foll	owing date:
Unit	ted States Bank	ruptcy Court fo	r the: MIDDLE DISTRICT OF FLOR	RIDA		MM / DD / YYYY	
Case	e number				П	A separate filing for D	ebtor 2 because Debtor 2
(If k	nown)					maintains a separate h	
Of	ficial Fo	rm B 6J					
			Expenses				12/13
Be a	as complete an	d accurate as p	ossible. If two married people are fili				
			ded, attach another sheet to this form	a. On the top of any addit	tional page	s, write your name a	nd case number
(if k	nown). Answe	r every questio	n.				
Part	1: Descri	be Your House	ehold				
1.	Is this a joint	t case?					
	No. Go to	line 2.					
	☐ Yes. Does	Debtor 2 live i	n a separate household?				
	□N	in.					
			st file a separate Schedule J.				
2.	Do you have		■ No				
	Do not list De	_	_	Donandant's valeti	onahin to	Donandont's	Does dependent
	Debtor 2.	edior i and	☐ Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	live with you?
	Do not state th	he dependents'					□ No
	names.						☐ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
							□ No
	_					_	☐ Yes
3.	Do your expe	enses include people other tha	■ No				
		your depender					
Part			ing Monthly Expenses r bankruptcy filing date unless you ar	no using this form as a su	nnlomont i	n a Chantar 12 aga	to report
expe	mate your exp enses as of a da	ate after the ba	nkruptcy is filed. If this is a suppleme	re using uns form as a su ental <i>Schedule J</i> , check th	ippiement i ie box at th	n a Chapter 13 case top of the form an	d fill in the
	licable date.		• •	,		•	
Incl	udo ovnencos i	naid for with n	on-cash government assistance if you	know the value of			
			d it on <i>Schedule I: Your Income</i> (Offic			Your exp	enses
			•	,			
4.			hip expenses for your residence. Includ	de first mortgage payment	s 4. :	\$	200.00
	and any rent i	for the ground o	i lot.				
	If not include	ed in line 4:					
	4a. Real es	state taxes			4a.	\$	375.00
	4b. Proper	ty, homeowner'	s, or renter's insurance		4b. 3	5	241.00
			pair, and upkeep expenses		4c. 3	\$	164.00
			ion or condominium dues		4d.		493.75
5.	Additional m	ortgage payme	ents for your residence, such as home e	equity loans	5.	\$	0.00

Colitics:	1)
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 6d. Other, Specify: 6d. S 6d. S 6d. Other, Specify: 6d. S 6d. S 6d. Other, Specify: 6d. S 6	
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 6d. Other, Specify: 6d. S Food and housekeeping supplies 7. S Childcare and children's education costs 8. S Childcare and children's education costs 8. S Clothing, laundry, and dry cleaning 9. S Personal care products and services 10. S Medical and dental expenses 11. S Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. S Entertainment, clubs, recreation, newspapers, magazines, and books 13. S Charitable contributions and religious donations 14. S Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. S 15d. Other insurance. Specify: Disability Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. S Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a. S 17b. Car payments for Vehicle 1 17c. Other. Specify: 17d. Other. Specify: 17e. Other. Payments on alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 61). Other payments on alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 61). Other payments you make to support others who do not live with you. S Specify: 19. Other. Payments you make to support others who do not live with you. S Specify: 19. Other. Payments you make to support others who do not live with you. S Specify: 19. Other. Payments you make to support others who do not l	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. \$ Food and housekeeping supplies 7. \$ Childcare and children's education costs 8. \$ Clothing, laundry, and dry cleaning 9. \$ Personal care products and services 10. \$ Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations 14. \$ Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. Health insurance 15c. Vehicle insurance. Specify: Long term care 15d. Other insurance. Specify: Long term care 15d. Other insurance. Specify: Long term care Disability 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay or included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or r	0.00
6d. Other. Specify: Food and housekeeping supplies Childraer and children's education costs 8. \$ Clothing, laundry, and dry cleaning 9. \$ Personal care products and services 10. \$ Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations 14. \$ Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: Cother insurance. Specify: Disability Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. \$ 17b. Car payments for Vehicle 1 17a. \$ 17b. Car payments for Vehicle 2 17b. \$ 17c. Other. Specify: 17c. Other. Specify: 17d. S Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). Other payments of alimony, maintenance and support that you did	
Food and housekeeping supplies Childcare and children's education costs Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services In S Medical and dental expenses In S Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance educted from your pay or included in lines 4 or 20. Isa. Life insurance Isa. Life insurance Isa. Life insurance Isa. Life insurance Isb. Health insurance Isc. Vehicle insurance Isb. Long term care Disability Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: Ira. Car payments for Vehicle 1 Ira. Car payments for Vehicle 1 Ira. Car payments for Vehicle 2 Irb. Other. Specify: Irc. Other. Specify: Ird. Other payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). Ird. Other payments you make to support others who do not live with you. Specify: Ird. Other payments you make to support others who do not live with you. Specify: Ird. And Maintenance, repair, and upkeep expenses Ird. Calculate your monthly expenses from line 22 above. Ird. Subtract your monthly expenses from line 22 above. Ird. Subtract your monthly expenses from line 22 above. Ird. Subtract your monthly expenses from your monthly income.	180.00
Childcare and children's education costs 8. \$	0.00
Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Long term care 15d. Other insurance your pay or included in lines 4 or 20. Specify: 16. \$ Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. \$ 17d. Other. Specify: 17c. \$ 17d. Other. Specify: 17d. \$ 17d. Other specify: 17d. \$ 17d. Other payments our make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support others who do not live with you. Specify: 19 Other payments you make to support your your your your your your your your	400.00
Personal care products and services Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Disability Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a. \$ 17b. Car payments for Vehicle 2 17b. S 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S Subtract your make to support others who do not live with you did not report as deducted from your pay on line S, Schedule I, Your Income (Official Form 61). 18. \$ Other payments you make to support others who do not live with you. Specify: Other payments you make to support others who do not live with you. Specify: Other payments you make to support others who do not live with you. Specify: Other payments you make to support others who do not live with you. Specify: Other payments you make to support of the	0.00
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Transportation. Include gas, maintenance, bus or train fare. 12. \$	20.00
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15d. Other insurance. Specify: Long term care Disability Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments 17a. \$ 17b. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. 0ther. Specify: 17d. Other. Specify: 17d. S 17d. Other. Specify: 17d. S 17d. Other specify: 17d. S 17d. S 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. \$ 20b. Real estate taxes 20c. \$ 20c. Property, homeowner's, or renter's insurance 20c. \$ 20d. Maintenance, repair, and upkeep expenses 20d. \$ 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20her: Specify: Wife - Mandatory club membership 21. +\$ Wife's LOC Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b\$ 23c. Subtract your monthly expenses from your monthly income.	139.19
Disability Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61). Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. \$ 20b. Real estate taxes 20b. \$ 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20c. Homeowner's association or condominium dues Other: Specify: Wife - Mandatory club membership 21. +\$ Wife's LOC Your monthly expenses. Add lines 4 through 21. The result is your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 23b. Copy your monthly expenses from line 22 above.	99.64
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23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income.	
23b. Copy your monthly expenses from line 22 above. 23b\$ 23c. Subtract your monthly expenses from your monthly income.	
23c. Subtract your monthly expenses from your monthly income.	5,395.01
22 16	5,357.73
The result is your monthly net income.	37.28
Journally not income.	31.28
Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decryour mortgage?	rease because of a modification to the
■ No.	
☐ Yes. Explain:	

Case 8:14-bk-08027-KRM Doc 1 Filed 07/11/14 Page 24 of 47

B6 Declaration (Official Form 6 - Declaration). (12/07)

Martyn C. Reece

In re

United States Bankruptcy Court Middle District of Florida

Case No.

			Debtor(s)	Chapter	13
	DECLARATI	ON CONCERN	NING DEBTO	R'S SCHEDULI	ES
	DECLARATION U	NDER PENALTY (OF PERJURY BY	INDIVIDUAL DEF	BTOR
	I declare under penalty of posheets, and that they are true and corn				es, consisting of18
Date	July 11, 2014	Signature	/s/ Martyn C. Re		
			Martyn C. Reec Debtor	e	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court Middle District of Florida

In re	Martyn C. Reece		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$17,971.75 2014 YTD Business income (gross commissions)

\$-17,444.00 2013 Business loss \$52,694.00 2012 Business income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$10,665.00 2013 Social Security

AMOUNT SOURCE

\$15,715.00 2014 YTD Social Security

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR **Vvstar Credit Union** 4441 Wesconnett By Jacksonville, FL 32210 DATES OF **PAYMENTS** 6/19

AMOUNT PAID \$754.96

AMOUNT STILL **OWING** \$350.00

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days

immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> DATES OF PAYMENTS/

AMOUNT PAID OR VALUE OF

AMOUNT STILL

NAME AND ADDRESS OF CREDITOR

TRANSFERS

OWING TRANSFERS

creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None П

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER **PROCEEDING** AND LOCATION DISPOSITION **CLUB VILLAS ASSOCIATION INC. vs. MARTYN** Civil Nassau County, FL Final

REECE et al

45-2011 CC 000146

FAIRWAY OAKS VILLAS ASSOCIATION, INC. vs. Civil

Nassau County, FL

Pending

MARTYN REECE et al 2013 CA 000435 AX

CHRISTINA TRUST, A DIVISION OF Civil. WILMINGTON SAVINGS v. MARTYN C. REECE et Foreclosure Nassau County, FL

Pending

13CA000683AXYX

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION PENNYMAC CORP vs. MARTYN REECE et al Civil. Nassau County, FL Pendina

13 CA 000387 AX

Foreclosure

None П

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

Club Villas Association c/o Tom Hollinsworth, Pres. 280 Skyline Parkway Athens, GA 30606

DATE OF SEIZURE 6/19/14; 7/03/14;

7/15/14

DESCRIPTION AND VALUE OF **PROPERTY**

\$2,730,97

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE. TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF **PROPERTY**

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

Flood in home; Recieved \$5,500

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

Flood in residence 6/1/14

6/1/14

9. Payments related to debt counseling or bankruptcy

None П

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT. NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Christopher D. Smith P.A. 5391 Lakewood Ranch Blvd N STE 203 Sarasota, FL 34240

7/7/14

\$1,690.00 + filing fee

AffordableBankruptcyCourses

7/7/14

25.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled

NAME AND ADDRESS OF TRANSFEREE.

RELATIONSHIP TO DEBTOR

Sandcastles at Amelia Island Condo Assoc c/o Joshua Martin, Esq.

960185 Gateway Blvd. STE 104 Fernandina Beach, FL 32034 None

DATE 5/16/12 DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

Quitclaim deed transfer to condo association

trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DATE(S) OF DEVICE TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

5

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

ADDRESS 6733 Virginia Crossing, University Park FL 2415 Boxwood Lane, Amelia Island FL 32034

Martyn C. Reece Martyn C. Reece

NAME USED

DATES OF OCCUPANCY

9/1/13 - 6/1/14 2012-2013

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

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B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL.

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL**

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

1/1/2004-2010

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL

BEGINNING AND TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS NATURE OF BUSINESS **ENDING DATES**

Real estate sales

Amelia Island 5653

Resales Realty

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME **ADDRESS**

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

7

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was

issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

DATES SERVICES RENDERED

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date July 11, 2014 /s/ Martyn C. Reece Signature

Martyn C. Reece

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Middle District of Florida

	Mi	ddle District of Florida	a	
In re Ma	artyn C. Reece		Case No.	
		Debtor(s)	Chapter	13
	CERTIFICATION OF UNDER § 342(b)	NOTICE TO CONS OF THE BANKRU	`	S)
I (V	We), the debtor(s), affirm that I (we) have re-	ertification of Debtor ceived and read the attache	ed notice, as required by	§ 342(b) of the Bankruptcy
Martyn C.	Reece	X /s/ Martyn	C. Reece	July 11, 2014
Printed Na	me(s) of Debtor(s)	Signature of	of Debtor	Date
Case No. (i	f known)	X		
		Signature of	of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Middle District of Florida

		made District of Frontag		
In re	Martyn C. Reece	DI(()	Case No.	42
		Debtor(s)	Chapter	_13
	VER	RIFICATION OF CREDITOR I	MATRIX	
The ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	July 11, 2014	/s/ Martyn C. Reece		01 11.0 H 10 10 10 10 10 10 10 10 10 10 10 10 10
		Martyn C. Reece		
		Signature of Debtor		
		6		

Martyn C. Reece 6503 Virginia Crossing University Park, FL 34201 Hyundai Motor Finance Attention: Bankruptcy Po Box 20809 Fountain Valley, CA 92728

Christopher D. Smith Christopher D. Smith P.A. 5391 Lakewood Ranch Blvd N STE 203 Amelia Island, FL 32034 Sarasota, FL 34240

Joshua Martin, Esq. 960185 Gateway Blvd. STE 104

AIPCA PO Box 15729 Fernandina Beach, FL 32035 Joshua Martin, Esq. 960185 Gateway Blvd STE 104 Fernandina Beach, FL 32034

Ben-Ezra & Katz PA Michelle Shupe- Abbas 2901 Stirling Rd. STE 900 Fort Lauderdale, FL 33312 Pennymac Loan Services 6101 Condor Drive, Suite 200 Moorpark, CA 93021

Christina Trust / Wilmington Trustee Stanwich Mort Loan c/o Ashley L Simon, Esq PO Box 800 Tampa, FL 33602

Sandcastles Condo Assoc. c/o Kenneth Hewitt, Pres. 9470 Riverclub Pkwy Duluth, GA 30097

Club Villas Association c/o Tom Hollinsworth, Pres. 280 Skyline Parkway Athens, GA 30606

Suntrust Mortgage Attention: Bankruptcy PO box 85092 Richmond, VA 23286

Edward Volger, Esq. 2411 Manatee Ave West Bradenton, FL 34205

Teresa L Prince, Esq. 406 Ash St. Fernandina Beach, FL 32034

Fairway Oaks Condo Assoc c/o Betty Bremson, Pres 3305 Sea Marsh Rd. Fernandina Beach, FL 32034

Gweneth M Brimm Esq. 1587 Northeast Exp Atlanta, GA 30329

United States Bankruptcy Court Middle District of Florida

Disclosure of Compensation of attorney for the above-named debtor an compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for servi be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due Salooo Of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associated to share the above-disclosed compensation with a person or persons who are not members or associates of copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.	
Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor an compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for servi be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 4,100.00 Prior to the filing of this statement I have received \$ 1,690.00 Balance Due \$ 2,410.00 2. \$ 310.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associated in the person of persons who are not members or associates of the paid to members or associates of the paid to share the above-disclosed compensation with a person or persons who are not members or associates of the paid to members or associates of the paid to members or associates of the paid to members or associates of the person or persons who are not members or associates of the paid to members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not members or associates of the person or persons who are not	
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☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of	
	iates of my law firm.
	of my law firm. A
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:	
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation reaffirmation agreements and applications as needed; preparation and filing of motions pursuan 522(f)(2)(A) for avoidance of liens on household goods. 	and filing of
 By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from any other adversary proceeding. 	m stay actions or
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of this bankruptcy proceeding.	f the debtor(s) in
Dated: July 11, 2014 /s/ Christopher D. Smith	
Christopher D. Smith 605433 Christopher D. Smith P.A.	_
5391 Lakewood Ranch Blvd N STE 203	
Sarasota, FL 34240 941-907-4774 Fax: 941-907-3040 smith@ChrisSmith.com	

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B 22C (Official Form 22C) (Chapter 13) (04/13)

In re	Martyn C. Reece	According to the calculations required by this statement:
	Debtor(s)	☐ The applicable commitment period is 3 years.
Case Nu		■ The applicable commitment period is 5 years.
	(If known)	☐ Disposable income is determined under § 1325(b)(3).
		■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Par	t I.	REPORT OF IN	COM	Œ					
1	Marital/filing status. Check the box that applies and complete the balance of this part of this state. a. □ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. ■ Married. Complete both Column A ("Debtor's Income") and Column B ("Speuse's Income").										
	All fi	b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") and Column B ("Spouse's Income") and Column B ("Spouse's Income received from all sources, derived during the sit calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.						Co D	r Lines 2-10 olumn A Debtor's Income		Column B Spouse's Income
2	Gross wages, salary, tips, bonuses, overtime, commissions.							\$	0.00	\$	4,591.74
3	enter profe numb	the difference in the appropriate column(s) of ssion or farm, enter aggregate numbers and proper less than zero. Do not include any part of luction in Part IV.	Lin	e 3. If you operate le details on an atta e business expense	more achm	e than one bus ent. Do not en ered on Line	siness, nter a				
	 	Construction	ď	Debtor 2,995.29	¢.	Spouse	0.00				
	a. b.	Gross receipts Ordinary and necessary business expenses	\$	2,995.29			0.00				
	c.	Business income	-	otract Line b from			0.00	\$	755.29	\$	0.00
	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV.										
4		of the operating expenses entered on Line b	as	a deduction in Par Debtor	o. Do rt IV.	Spouse	any				
4	part o	of the operating expenses entered on Line b Gross receipts	as a	Debtor 0.00	o. Do	o not include Spouse	0.00				
4	a. b.	Gross receipts Ordinary and necessary operating expenses	\$ \$	Debtor 0.00 0.00	o. Do rt IV. \$	o not include Spouse	any	¢.	0.00	¢.	0.00
	a. b. c.	Gross receipts Ordinary and necessary operating expenses Rent and other real property income	\$ \$	Debtor 0.00	o. Do rt IV. \$	o not include Spouse	0.00	\$	0.00	Ė	0.00
5	a. b. c.	Gross receipts Ordinary and necessary operating expenses	\$ \$	Debtor 0.00 0.00	o. Do rt IV. \$	o not include Spouse	0.00	\$ \$	0.00	\$	
	a. b. c.	Gross receipts Ordinary and necessary operating expenses Rent and other real property income	\$ \$	Debtor 0.00 0.00	o. Do rt IV. \$	o not include Spouse	0.00			Ė	0.00 0.00 0.00
5	a. b. c. Inter Pensi Any a exper purpodebto	Gross receipts Ordinary and necessary operating expenses Rent and other real property income est, dividends, and royalties.	\$ St St	Debtor 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0	s Line	Spouse Spouse a a a a a b a b a b c a b c c d d d d d d d d d d d	0.00 0.00	\$	0.00	\$	0.00
5	a. b. c. Inter Pensi Any a exper purp debto listed Unen Howe benef or B,	Gross receipts Ordinary and necessary operating expenses Rent and other real property income est, dividends, and royalties. ion and retirement income. amounts paid by another person or entity, onses of the debtor or the debtor's dependent ose. Do not include alimony or separate main or's spouse. Each regular payment should be re-	\$ Su	regular basis, for acluding child sup and in only one column B. e appropriate column colution received by yellow the column colution received by yellow to the column colution received by yellow to the column colu	the hours and the second of th	spouse Spouse a a nousehold paid for that tts paid by the if a payment of Line 8. your spouse	0.00 0.00 0.00	\$	0.00	\$	0.00

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.		
	a. Debtor Spouse \$		
	b. \$ \$	0.00 \$	0.00
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	755.29 \$	4,591.74
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		5,347.03
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERI	OD	
12	Enter the amount from Line 11	\$	5,347.03
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of you enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular be the household expenses of you or your dependents and specify, in the lines below, the basis for excluding income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjut on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a.	er spouse, easis for g this etor or the	
	C. \$ Total and enter on Line 13	\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.	\$	
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number enter the result.		5,347.03 64,164.36
16	Applicable median family income. Enter the median family income for applicable state and household s information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	ize. (This	
	a. Enter debtor's state of residence: FL b. Enter debtor's household size:	2 \$	52,598.00
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable com top of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable at the top of page 1 of this statement and continue with this statement. 		
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE IN	COME	
18	Enter the amount from Line 11.	\$	5,347.03
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B incom payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments separate page. If the conditions for entering this adjustment do not apply, enter zero.	s of the e (such as	
	a. Non-filing spouse debt service \$ 1,200.00		
	b. Mandatory club fee for neighborhood \$ 50.00		
	c. HSA \$ 274.99		
	d 401k \$ 433.33		
	d. 401k \$ 433.33 Total and enter on Line 19.	\$	1,958.32

21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 enter the result.							\$	40,664.52
22	Applic	able median family incom	e. Enter the amount from	m Lin	ie 16.			\$	52,598.00
23	1022 (c)(c) at the top of page 1 of this statement and complete the formaling parts of this statement.							ined u	ınder §
	■ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete								
		Part IV. Ca	ALCULATION (OF I	DEDU	CTIONS FR	OM INCOME		
		Subpart A: D	eductions under Star	ndar	ds of th	e Internal Reve	nue Service (IRS)		
National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemption on your federal income tax return, plus the number of any additional dependents whom you support.						Expenses for the om the clerk of the e allowed as exemptions	\$		
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.						onal Standards for able at cable number of persons o are 65 years of age or ory that would currently ional dependents whom and enter the result in the case of the		
	Perso	ns under 65 years of age		Pers	sons 65 y	ears of age or old	ler		
	a1.	Allowance per person		a2.	Allowa	ince per person			
	b1.	Number of persons		b2.		er of persons			
	c1.	Subtotal		c2.	Subtota	al		\$	
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.						nis information is e family size consists of	\$	
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any						this information is e family size consists of urn, plus the number of lonthly Payments for any		
		IRS Housing and Utilities				\$			
		Average Monthly Payment home, if any, as stated in L	ine 47	y you	II'	\$			
		Net mortgage/rental expens				Subtract Line b fr		\$	
26	25B do Standa	Standards: housing and upperson accurately compute rds, enter any additional and tion in the space below:	the allowance to which	you a	re entitle	ed under the IRS H	Iousing and Utilities		
								\$	

	_		,		
27A	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 7.	expenses of operating a vehicle and ses or for which the operating expenses are			
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the				
	Standards: Transportation for the applicable number of vehicles in the				
	Census Region. (These amounts are available at www.usdoj.gov/ust/		\$		
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public To Standards: Transportation. (This amount is available at www.usdoj.gg court.)	\$			
	Local Standards: transportation ownership/lease expense; Vehicle	1 Chack the number of vehicles for which			
	you claim an ownership/lease expense. (You may not claim an owner				
	vehicles.) \square 1 \square 2 or more.				
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Lithe result in Line 28. Do not enter an amount less than zero.	court); enter in Line b the total of the Average			
	-	Φ.			
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$			
	b. 1, as stated in Line 47	\$			
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$		
29	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero.	e IRS Local Standards: Transportation court); enter in Line b the total of the Average			
	a. IRS Transportation Standards, Ownership Costs	\$			
	Average Monthly Payment for any debts secured by Vehicle				
	b. 2, as stated in Line 47	\$			
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$		
30	Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale	come taxes, self employment taxes, social	\$		
	Other Necessary Expenses: involuntary deductions for employmen				
31	deductions that are required for your employment, such as mandatory				
	uniform costs. Do not include discretionary amounts, such as volu		\$		
	Other Necessary Expenses: life insurance. Enter total average mon	thly premiums that you actually pay for term			
32	life insurance for yourself. Do not include premiums for insurance				
	any other form of insurance.		\$		
	Other Necessary Expenses: court-ordered payments. Enter the tot	tal monthly amount that you are required to			
33	pay pursuant to the order of a court or administrative agency, such as				
	include payments on past due obligations included in line 49.		\$		
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Ente				
	providing similar services is available.		\$		
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do		\$		
36	Other Necessary Expenses: health care. Enter the total average mo health care that is required for the health and welfare of yourself or yoursurance or paid by a health savings account, and that is in excess of include payments for health insurance or health savings accounts	our dependents, that is not reimbursed by the amount entered in Line 24B. Do not	\$		
	mende payments for neutral insurance of neutral surings accounts	note in the con	Ψ		

5

37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount actually pay for telecommunication services other than your basic home telephone and cell phone is pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your dependents. Do not include any amount previously deducted.	service - such as			
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$			
	Subpart B: Additional Living Expense Deductions	<u> </u>			
	Note: Do not include any expenses that you have listed in Line	es 24-37			
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the month the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or dependents.				
39	a. Health Insurance \$				
	b. Disability Insurance \$				
	c. Health Savings Account \$				
	Total and enter on Line 39	\$			
	If you do not actually expend this total amount, state your actual total average monthly expendit below: \$	ures in the space			
40	Continued contributions to the care of household or family members. Enter the total average at expenses that you will continue to pay for the reasonable and necessary care and support of an elder ill, or disabled member of your household or member of your immediate family who is unable to payenses. Do not include payments listed in Line 34.	erly, chronically			
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or othe applicable federal law. The nature of these expenses is required to be kept confidential by the court.				
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified Standards for Housing and Utilities that you actually expend for home energy costs. You must pre trustee with documentation of your actual expenses, and you must demonstrate that the additical claimed is reasonable and necessary.	ovide your case			
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25 per child, for attendance at a private or public elementary or secondary				
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National				
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month o contributions in the form of cash or financial instruments to a charitable organization as defined in 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.				
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.	\$			

Monthly incl	ment, and f all amounts bankruptcy				
Name of Creditor Property Securing the Debt Average Monthly incl	rage Monuny				
	es payment lude taxes nsurance				
a. \$ \square you Total: Add Lines	res □no \$				
Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary remotor vehicle, or other property necessary for your support or the support of your dependents, you mean your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to payments listed in Line 47, in order to maintain possession of the property. The cure amount would in sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such the following chart. If necessary, list additional entries on a separate page.	nay include in to the nclude any h amounts in				
Name of Creditor Property Securing the Debt 1/60th of the C	cure Amount				
	l: Add Lines \$				
Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.					
a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a	a and b \$				
51 Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.	\$				
Subpart D: Total Deductions from Income	·				
52 Total of all deductions from income. Enter the total of Lines 38, 46, and 51.	\$				
52 Total of all deductions from income. Enter the total of Lines 38, 46, and 51. Part V. DETERMINATION OF DISPOSABLE INCOME UNDER §	·				
	·				
Part V. DETERMINATION OF DISPOSABLE INCOME UNDER §	\$ 1325(b)(2) \$				
Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 53 Total current monthly income. Enter the amount from Line 20. Support income. Enter the monthly average of any child support payments, foster care payments, or payments for a dependent child, reported in Part I, that you received in accordance with applicable no	\$ 1325(b)(2) \$ chisability onbankruptcy \$ oper from				

			1			
	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable.					
57	Nature of special circumstances	Amount of Expense				
	a.	\$				
	b.	\$				
	c.	\$				
		Total: Add Lines	\$			
58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.					
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.					
Part VI. ADDITIONAL EXPENSE CLAIMS						
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.					
60	Expense Description	Monthly Amo	unt			
	a.	\$				
	b.	\$				
	c.	\$				
	d.	\$				
	Total: Add Lines	s a, b, c and d \$				
Part VII. VERIFICATION						
61	I declare under penalty of perjury that the information provided <i>must sign.</i>) Date: July 11, 2014	ı joint case, both debtors				
01		Signature: /s/ Martyn C. Reece Martyn C. Reece				
		(Debtor)				

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2014 to 06/30/2014.

Line 3 - Income from operation of a business, profession, or farm

Source of Income: **Real estate sales** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	01/2014	\$0.00	\$2,240.00	\$-2,240.00
5 Months Ago:	02/2014	\$0.00	\$2,240.00	\$-2,240.00
4 Months Ago:	03/2014	\$0.00	\$2,240.00	\$-2,240.00
3 Months Ago:	04/2014	\$11,694.62	\$2,240.00	\$9,454.62
2 Months Ago:	05/2014	\$0.00	\$2,240.00	\$-2,240.00
Last Month:	06/2014	\$6,277.13	\$2,240.00	\$4,037.13
	Average per month:	\$2,995.29	\$2,240.00	
			Average Monthly NET Income:	\$755.29

Remarks:

expenses averaged per month based on 2013 tax return

Non-CMI - Social Security Act Income Source of Income: Social Security Constant income of \$2,245.00 per month.

9

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **01/01/2014** to **06/30/2014**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Payne Law Group

Year-to-Date Income:

Total Year-to-Date Income: \$27,550.44 from check dated 6/30/2014 .

Average Monthly Income: \$4,591.74.